

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Number::	Unassigned
Application Date::	11/14/03
Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	DIAGNOSTIC DEMONSTRATION DEVICES AND METHODS
Attorney Docket Number::	178.0004 0101
Total Drawing Sheets::	2
Small Entity?::	YES

INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	US
Status::	FULL CAPACITY
Given Name::	Daniel
Middle Name::	D.
Family Name::	WITKOWSKI
City of Residence::	Minneapolis
State or Province of Residence::	Minnesota
Country of Residence::	US
Street of Mailing Address::	600 Highway 169 South
City of Mailing Address::	Minneapolis
State or Province of Mailing Address::	Minnesota
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	55426

CORRESPONDENCE INFORMATION

Correspondence Customer Number::	26813
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REPRESENTATIVE INFORMATION

Representative Customer Number::	26813
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DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/426,301	11/14/02

ASSIGNMENT INFORMATION

Assignee Name:: MagicCom
 Street of Mailing Address:: Interchange Tower
 600 Highway 169 South
 City of Mailing Address:: Minneapolis
 State or Province of Mailing Address:: Minnesota
 Country of Mailing Address:: US
 Postal or Zip Code of Mailing Address:: 55426